



"Inspire and prepare children, youth and families to reach their full human potential through social, emotional and professional development while encouraging academic excellence"

1909 W. Imperial Hwy~ Los Angeles, CA. 90047
(323) 364-2015

May 29, 2015

To: Los Angeles County Board of Supervisors
Re: Health Integration Draft Report

As President/CEO of Inner City Industry and current co-chair of the department of mental health cultural competency committee and in accordance with multiple community-based organizations, we whole-heartedly support the integration of mental health, public health and health service systems of care into a single unit agency. It has become crucial to better population health outcomes as trauma has been defined as the issue of our time. Pursuit of a patient-centered system of care represents the unique opportunity to initiate dialogue across government agencies, contract providers and community stakeholders to communicate a clear pathway to reduce racial/ethnic social determinate of health disparity.

In 1998, I discovered students with behavioral issues were being diagnosed with mental illnesses. The system error resulted in countless youth being inappropriately labeled and one of several reasons the word "mental health" is stigmatized beyond repair. Since, I have gained expertise in whole-system transformational change and currently represent both the African American and Latino Underrepresented Ethnic Populations (UREP) subcommittees. In assessing community needs, each of the five state funded California Reducing Disparities Project (CRDP) reports confirmed a common theme. Stigma associated with mental health is the most prevalent barrier to citizen understanding the significance of mental health and accessing services. Health integration presents the opportunity to rebrand direct care services as "behavioral health care" and build growth capacity instituting prevention and early intervention (PEI) services within a continuum of systems framework. Branding PEI as "behavioral health learning supports" will systemically eliminate mental health stigma among future generations.

Concerns expressed in the CEO's Draft Report as well as during convening's hosted throughout the public comment period questioned the agency structure, culture and lack of community engagement. While each area of concern is valid, many of the identified risk and challenges may be mitigated through coordinated communication amongst select system administrators, contract providers and community-based stakeholders groups. There are multiple research theory's and practices applicable to restructuring the core support and work processes of each system while developing supportive policy. A fully integrated system of care will achieve mental health parity per Affordable Care Act law. Integration is crucial to bettering population health outcomes, which one system cannot accomplish alone. To achieve the triple aim established by the Center for Medicare and Medicaid services, health integration transformation ought to include the departments of child and family services, probation and office of education to congruently reduce disparities across systems.

We encourage the board of supervisors to embrace Schumpeterian theory which suggest the creative destruction and innovative reconstruction as a core principal of health integration to establish a culturally responsive and equitable system of care. We recommend the board of supervisor's commission white papers by consultants that address concerns identified in the CEO's final report by delineating a vision, processes and timeline to integrate multiple systems. In advance, please consider adhering to the summary points below to increase knowledge acquisition as a non-threatening approach to engaging all aforementioned stakeholders in further dialogue.



inner city industry

"Inspire and prepare children, youth and families to reach their full human potential through social, emotional and professional development while encouraging academic excellence"

1909 W. Imperial Hwy~ Los Angeles, CA. 90047
(323) 364-2015

- As primary and essential to reducing racial/ethnic disparity, cultural competency must be embedded and considered in all aspect of decision making and delivery of services to strengthen the quality of care. An advantageous next step, consider convening each county department cultural competency committee, unit and/or processes to initiate and share dialogue related to policy and practices implementing cultural competency. This internal system process will prepare agency leadership in principal on the necessity of embracing cultural competency in advance of health integration.
- Given trauma has been described as the issue of our time. Review and embrace strategies and program recommendations within the California Reducing Disparities Project (CRDP) reports as baseline data acknowledging community voice, need and desires. Each CRDP profile report will aid in developing a culturally responsive system of care based on recent and relevant community stakeholder input. This report will mirror data presented in the department of mental health's 2008 population report which identified vulnerable communities within Los Angeles County.
- Identify revenue streams in which resources are held in a wellness trust to reimburse prevention and early intervention services. This approach requires an improved and sustainable reimbursement model to facilitate delivery of integrated care within a continuum of systems approach. As example, Best Start communities rely on proposition 10 funding. Several additional tax-payer proposition's 30, 47 and 63 are also designated to better individual and population health outcomes. Withstanding legal restrictions, consider pooling resources to equitably distribute and manage tax-payer resources to strengthen the safety-net of services simplified by community-based providers.
- Strategically increase opportunities for community input. Health integration of this magnitude at minimum is a five year process produced in multiple phases. Imperative to success is an effective social marketing strategy directed at community integration to gain legitimacy among county residents. Social marketing commences with mapping and analyzing resources, appointing transformation leadership, reaching common ground among stakeholders, developing policy, implementing recommendations, evaluating processes, scaling changes and making continuous improvements.

Bear in mind, whole-system transformational change suggest, changing one part of a system requires changing the whole system. Piecemeal processes and administrative repositioning fail to have lasting impact and causes greater damage to the external ecosystem. Such a proposed shift in thinking requires an upstream approach to social change. Essential to reducing the range of health, education and economic disparities, residents must be intimately involved in reconstructing the system of care to develop an ownership mindset and acceptance of changes.

We commend the Board of Supervisors for issuing this motion. Health integration presents the opportunity to exhibit Angelino unity and pride in leading the transformation of health and human services throughout Los Angele County.

Thank you for your consideration.

Bruce M. Wheatley
Bruce M. Wheatley

www.innercityindustry.org
A positive trend for youth to follow